PTO/SB/21 (08-00)

TELLI-		Application Number		09/939,767				
TRANSMITTAL FORM			Filing Date		August 28, 2001 Shunpei YAMAZAKI			
			First Named Inventor					
		Group Art Unit		2813				
(to be used for all correspon	itial filing)	Examiner Name		D. Hogans				
Total Number of Pages in This Submission			Attorney Docket Numb	er	0756-2358			
ENCLOSURES (check all that apply)								
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declaration(s Extension of Time Reques Express Abandonment Re Information Disclosure Sta Certified Copy of Priority Document(s) Response to Missing Parts Incomplete Application Response to Missing F under 37 CFR 1.52 or	Assignment (for an	ment Papers Application) g(s) ation and Power of by ng-related Papers of to Convert to a conal Application of Attorney, Revocation of Of Orrespondence s al Disclaimer et for Refund mber of CD(s) The Commissioner is	2. 3. 4. 5. 6. Doner is hereby authorized to charge any additional dit any overpayments to Deposit Account No. 50					
	SIGNATUI	RE OF APPL	LICANT, ATTORNEY, C	OR AC	GENT			
Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165							
Signature	<u></u>							
Date November 10, 2004								
CERTIFICATE OF MAILING								
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Type or printed name	Ad	eleM S	Stamper					

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x.)	Complete if Known							
FEE TRANSMITTAL	Application Number	09/939,767						
ree iransmillial	Filing Date	August 28, 2001						

FOR FY 2005

Signature

Effective 10/01/2004. Patent fees are subject to annual revision. ☐ Applicant Claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

	Complete if Known							
Application Number	09/939,767							
Filing Date	August 28, 2001							
First Named Inventor	Shunpei YAMAZAKI							
Examiner Name	D. Hogans							
Group Art Unit	2813							
Attorney Docket No	0756-2358							

November 10, 2004

Date

(4) 11100				7/10/10/ DOCKET 10. 0750-2550								
METHOD OF PAYMENT				FEE CALCULATION (continued)								
1. The Commissioner is hereby authorized to charge indicated				3. ADDITIONAL FEES								
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Applicant claims small entity status.			1251	110	2251	55 Extension for reply		y within first mon	within first month			
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1002 350	2002 17	75 Design filing fee		1452	110	2452		Petition to revive -				
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1005 160	2005 8	Provisional filing fee		1502	490	2502	245	Design issue fee				
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SUBTOTAL (1) (\$)				1460	130	1460	130	Petitions to the Co	mmissioner			
2. EXTRA CLAIM FEES			<u> </u>	1807	50	1807	50	Processing fee und	ler 37 CR 1.17(a)			
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Large Entity	Small En	tity		1801	790	2801	395	Request for Contin	nued Examination	(RCE)	\$790	
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1204 88 2204 44 ** Reissue independent claims over			* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1110.00									
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SUBMITTED BY									Complete (if	applicable)		
Frie I Pohinson			1	Regis	tration	No.	38	,285		(571) 434-678	9	
Name (Print/Type)				(Attorney/Agent) Telephone (571) 454-6769				-				